

## **CONTRACTOR REGISTRATION APPLICATION**

Please Mark - <u>Applying for</u> :					
General Contractor	Electrical Contractor		Mechanical C	ontractor	
Plumbing Contractor	_ Irrigator Fi	re Systen	ns S	ign Contractor	
Company or Business Name: (Ple	ease provide copy of A	ssumed	Name Certific	ate)	_
Address	City	State	Zip Code	Phone Number	_
Number of years the company has	s been in existence:				_
Principal Owner of Company					
Name of company operator or ma	nager:				
Name of person filling out applicate	tion and position:				
Address	City	State	Zip Code	Phone Number	_
If this <u>company or business name</u> names used within the last five (5)		ss than or	ne (1) year, lis	st the previous compa	r
1	2				
3	4				
If the <u>current business address</u> haddresses used within the last five			(1) year, list tl	he previous business	
1	2				
3	4.				

Do you, as Principal Owner or Operator/Manager of the company, have a final criminal conviction of theft, or deceptive business practices under the Texas Penal Code, and said conviction arose out of conduct related to the home remodeling business? Yes No If yes, give date and county in which conviction was entered:
Do you, as Principal Owner or Operator/Manager of the company, under the Texas Deceptive Trade Practices Act, have any civil judgments entered against you within the last five (5) years prior to the filing of this application?
Yes: No: If yes, please provide the date and county in which the judgment was entered:
Have the judgments been satisfied? Yes No (Please attach proof)
Signature of Principal Owner or Please Print Name Operator/Manager of the company

City Development Department #2 Civic Center Plaza- 1st Floor El Paso, Texas 79901-1196 (915) 541-4558; Fax: (915) 541-4815